

Application for Employment

City of Tupelo
P.O. Box 1485 • 71 Troy Street
Tupelo, MS 38802 Tupelo MS, 38804

The City of Tupelo considers all applicants for employment without regard to race, color, religion, sex, national origin, age, disability or status as a veteran. The City of Tupelo also provides "reasonable accommodations" to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local laws.

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # () _____ Mobile/Beeper/Other Phone # () _____ E-mail Address _____

Position(s) applied for _____ Date of application ____/____/____

May we contact you at work?.....☐ Yes ☐ No

If yes, work number and best time to call: _____
() : _____ AM
PM

If you are under 18 and it is required,
can you furnish a work permit?.....☐ Yes ☐ No

If no, please explain _____

Have you submitted an application here before? ..☐ Yes ☐ No

If yes, give date(s) and position(s) _____

Have you ever been employed by the
City of Tupelo?.....☐ Yes ☐ No

If yes, give dates From ____/____/____ To ____/____/____

Can you submit proof of legal employment
eligibility and of identity?.....☐ Yes ☐ No

Date available for work.....____/____/____

Military Service:☐ Yes ☐ No

Branch _____ From ____/____/____ To ____/____/____

Type of employment desired: ☐ Full-Time ☐ Part-Time

☐ Educational Co-Op ☐ Seasonal ☐ Temporary

Will you travel if job requires it?☐ Yes ☐ No

List relatives employed by the City of Tupelo:

Name _____ Relationship _____

Name _____ Relationship _____

Will you work overtime if required?.....☐ Yes ☐ No

If no, please explain _____

Do you have a valid driver's license?.....☐ Yes ☐ No
Indicate number: _____

_____ State _____

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever been convicted of a crime?.....☐ Yes ☐ No

If yes, please provide date(s) and details _____

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Employment History

Have you ever been discharged or asked to resign from a position? ☐ Yes ☐ No If so, explain _____

Starting with your most recent employer, provide the following information.

If you are now employed, may we contact your present employer? ☐ Yes ☐ No

Employer ()	Telephone # ()	Dates employed Month / Year to Month / Year
Street Address City State	Compensation (Starting) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____	
Starting job title/final job title	Compensation (Final) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____	
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Why did you leave?		
Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		

Employer ()	Telephone # ()	Dates employed Month / Year to Month / Year
Street Address City State	Compensation (Starting) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____	
Starting job title/final job title	Compensation (Final) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____	
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Why did you leave?		
Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		

Employer ()	Telephone # ()	Dates employed Month / Year to Month / Year
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What did you like most about your position?		
What were the things you liked least about the position?		

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

(Licenses, Certifications, Heavy Equipment Operator, etc.) _____

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

<input type="checkbox"/> Word Processing _____ Years: _____	<input type="checkbox"/> Internet _____ Years: _____
<input type="checkbox"/> Spreadsheet _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> Presentation _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> E-mail _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship To You	Telephone	Number of Years Known
			()	
			()	
			()	

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Is there any other job-related information you want us to know about you? _____

Pre-employment statement

(Please read carefully and sign the statement below.)

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification of refusal of employment, or if employed, termination from the City of Tupelo's employ.

2. Any offer of employment I may receive from the City of Tupelo is contingent upon my successful completion of the City's total pre-employment screening process, including the City's receiving references that it considers satisfactory, and my satisfactory completion of any postoffer pre-employment medical examination that the City may require. I hereby consent to having the results of any postoffer pre-employment medical exams I may be required to take disclosed to the City of Tupelo. All such exams and records related to such exams shall be handled in accordance with applicable laws.

3. I understand that as a condition of employment, I shall be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that if employed, I may be required to submit to an alcohol or drug screening according to the provisions of the City's Drug and Alcohol Testing policy. I hereby consent to having the results of any such alcohol or drug screening I may be required to undergo disclosed to the City in accordance with applicable laws.

4. I hereby authorize the City to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions and references. I also hereby release from liability the City and its representatives for seeking, gathering and using such information to make employment decisions and all other persons or organizations for providing such information.

5. In consideration for my employment, I agree to comply with the policies, rules, regulations, and procedures of the City and understand that my employment can be terminated with or without cause or notice, at any time, at the option of either the City or myself. I further understand that no representative of the City has any authority to enter into any agreement with me for employment for any specified period of time.

6. I understand that it is the policy of the City not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

7. I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work eligibility.

8. I understand the City of Tupelo is an Equal Opportunity Employer. The City of Tupelo does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

9. This application will be considered active for only 90 days. At the conclusion of this time, if I have not heard from the City of Tupelo and still wish to be considered for employment, it will be necessary to complete a new application.

I represent and warrant that I have read and fully understand the foregoing and that I seek employment under these conditions.

Signature: _____ Date: _____

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